SUBMIT: COMPLETED APPLICATION, STATEMENT AND FEE TO: Bayfield County
Planning and Zonling Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY WISCONSIN

JUN 052014

ENTERED Permit #:

#75

Date: Amount Paid:

36

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Cash

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp) Refund:

Sayirad Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Contractor: Self TYPE OF PERMIT REQUESTED Authorized Agent: (Person Signing Appli address of Property: 69510 Five Lake Bradie PROJECT LOCATION Section \_1/4, (3)  $\mathbb{Z}$ 22 Legal Description: (Use Tax Statement) , Township 2 ication on behalf of Owner(s)) X LAND USE N. Range Lot(s)  $\infty$ 018 m PIN: (23 digits) ٤ Agent Phone: Contractor Phone: Ity/State/Zip: Freukes مر Vol & Page Town of: 1-20-80-1 Agent Mailing Address (include City/State/Zip): 7 CONDITIONAL USE Lot(s) No. 2 City/State/Zip: 54847 6 Z. Błock(s) No. 000-1000 SPECIAL USE WI SYBUT 715-372-5676 Cell Phone: Plumber Phone: Telephone: Written Authorization Page(s) 423 OTHER

| XShoreland →  | ☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)  Creek or Landward side of Floodplain? If yes—continue →  X is Property/Land within 1000 feet of Lake, Pond or Flowage If yes—continue → | n 300 feet of River, Streen<br>of Floodplain? If y<br>n 1000 feet of Lake, Pon | If yes—continue —> If yes—continue —> | Distance Stru       | Distance Structure is from Shoreline:  fee  Distance Structure is from Shoreline: fee | yrelinu<br>    | reline : Is Property in feet Floodplain Zone? Yes feet XNo   |
|---|---|--|---------------------------------------|---------------------|---|----------------|--|
| X Shoreland →   | X Is Property/Land withir   | ו 1000 feet of Lake, Pon<br>ול ץ   | ıd or Flowage<br>escontinue≽          | Distance Stru       | Distance Structure is from Shoreline:   | ' <u>_</u> = ' |  |
| ☐ Non-Shoreland   |   |  |                                       |                     |   |                |  |
| Value at Time of Completion * include donated time & material | Project<br>(What are you applying for)  | # of Stories<br>and/or basement  | Use                                   | #<br>of<br>bedrooms | <b>S</b> 2  | Wh<br>wer/S    | What Type of<br>Sewer/Sanitary System<br>Is on the property? |
|   | XNew Construction   | X 1-Story  | □ Seasonal                            | □ 1                 | ☐ Municipal/City  | al/City        | al/City  |
| •   | ☐ Addition/Alteration   | ☐ 1-Story + Loft   | 💢 Year Round                          | □ 2                 | □ (New)   | Sanitary       | ☐ (New) Sanitary Specify Type:                               |
| 000/2 ¢   | □ Conversion  | □ 2-Story  |                                       | _ 3                 | 🗴 Sanita  | ry (Exists     | X Sanitary (Exists) Specify Type: (1011)                     |
|   | ☐ <b>Relocate</b> (existing bldg)   | ☐ Basement   |                                       |                     | ☐ Privy   | (Pit) or       | Privy (Pit) or Uaulted (min 200 gallon)                      |
|   | □ Run a Business on   | ☐ No Basement  |                                       | X None              | □ Porta   | ble (w/serv    | ☐ Portable (w/service contract)                              |
|   | Property  | ☐ Foundation   |                                       |                     | □ Compost Toilet  | st Toilet      | ost Toilet   |
|   |   |  |                                       |                     | :   |                |  |

| neight: | ARIOTH: | relevant to iti  |
|---------|---------|--|
|         | 145145. |  |
| Height: | Width:  | Structure: (if permit being applied for is relevant to it) Length: |

| Proposed Use       | •   | Proposed Structure   | Dimensions | ons           | Square<br>Footage |
|--------------------|-----|--|------------|---------------|-------------------|
|                    |     | Principal Structure (first structure on property)  | ( ×        | )             |                   |
|                    |     | Residence (i.e. cabin, hunting shack, etc.)  | ( x        | )             |                   |
| ,                  |     | with Loft  | ( X        |               |                   |
| X Residential Use  |     | with a Porch   | ~<br>×     | <b>-</b>      |                   |
| ~                  |     | with (2 <sup>nd</sup> ) Porch  | ×          | )             |                   |
|                    |     | with a Deck  | ×          | )             |                   |
| •                  |     | with (2 <sup>nd</sup> ) Deck   | ( X        | )             |                   |
| ☐ Commercial Use   |     | with Attached Garage   | ( x        | )             |                   |
|                    |     | <b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities) | ( ×        | }             |                   |
|                    |     | Mobile Home (manufactured date)  | ( X        | )             |                   |
| ]                  |     | Addition/Alteration (specify)  | ( x        | )             |                   |
| ☐ Wunicipal Use    | Þ   | Accessory Building (specify) Carage  | 1 32×36    | 36)           | 1152              |
|                    |     | Accessory Building Addition/Alteration (specify) lean to   | ( 10×36    | 36 )          | 360               |
|                    |     |  |            | <del></del> - |                   |
| Rec'd for Issuance |     | Special Use: (explain)   | ` x        | )             |                   |
|                    |     | Conditional Use: (explain)   | ×          | <b>~</b>      |                   |
|                    |     | Other: (explain)   | ×          | _             |                   |
|                    | *** |  |            |               |                   |

| Owner(s): 1926       | may be a result of Bayfield County relying on this information I (we) am (are) above described property at any reasonable time for the purpose of inspection.   | am (are) responsible for the detail and ac   | (Secolaria) State on (include  |
|----------------------|---|--|--|
| Owner(s): Modly List | may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering could be described property at any reasonable time for the purpose of inspection. | racy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a | FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  [IN STARTING CONSTRUCTION WITHOUT A PENALTIES  [IN STARTING CONSTRUCTION WITHOUT WITH |
| Date 6-04-14         | ring county ordinances to have access to the  | a permit. I (we) further accept liability which  | and complete. I (we) acknowledge that I (we)   |

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(If there are Multiple Owners listed on the Deed All Ow

(If you are signing on behalf of the owner(s) a letter application)

ers must sign <u>or</u> letter(s) of authorization

ust accompany this application)

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Attach
Copy of Tax Statement Copy of Tax Sta Date

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SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

<u>APPLI</u> BAYFIEL

Date Stan

| Bayrield Co. Zoning | 052014                 | NAY WISCON | ICATION FOR PERMI |     |
|---------------------|------------------------|------------|-------------------|-----|
| Refund:             |                        |            | Permit#:          | カレス |
|                     | bunt Paid: 6-4-14 (ASI | 0-10       | 7-1/              |     |
|                     | Chest Line             |            |                   |     |

| Secretarial Staff                 |  |   | HEC 0 101 1990ans  | Boo'd for Issuance                               | - Williams         |                     |                                 |  | ☐ Commercial Use     |                              |             |                               | Residential Use  | (         | r, en   |   | Proposed Use       | Proposed Construction: | Existing Structure: (If permit being applied for is relevant to it) |  |  |   | 1<br>                      |  | ><br>><br>><br>>                    |                  | Value at Time of Completion * include donated time & material | X Non-Shoreland |  | ,  | Section 2    | ~         | SE 1/4, NL                | LOCATION L             |  | Authorized Agent: (Person Signing Application on behalf of Owner(s)) | Contractor:       | 69510 Fire | - @  `      | STALLOS                     | TYPE OF PERMIT REQUESTED |
|-----------------------------------|--|---|--|--|--------------------|---------------------|---------------------------------|--|----------------------|------------------------------|-------------|-------------------------------|--|-----------|---|---|--------------------|------------------------|---|--|--|---|----------------------------|--|-------------------------------------|------------------|---|-----------------|--|--|--------------|-----------|---------------------------|------------------------|--|--|-------------------|------------|-------------|-----------------------------|--------------------------|
|                                   |  |   |  |  | <u> </u>           | ×                   | Ľ                               |  | П                    |                              |             |                               |  |           |   | 8   | ~                  | on:                    | if permit being   |  | Property   | Run a Business on                       | □ Relocate (existing bldg) | Conversion                                 | Addition/Alteration                 | New Construction | Project<br>(Winat are you applying for)                       |                 | ls Property/La   | ls Property/La   | , Township   | _ t       | 71 42                     | Legal Description:     |  | on Signing Applicati   |                   | Lake K     | 0           |                             | UESTED—▶                 |
| Other: (explain)                  | Conditional Use: (explain)   | Special Use: (explain)  |  | ccessory Built                                   | Accessory Building | Addition/Alteration | Mobile Home (                   | unkhouse w/  | wit                  | wit                          | wit         | wit                           | wit  | wit       | lesidence (i.e.                             | rincipal Struct                                   |                    |                        | applied for is rel  |  | 1  |   |                            |  |                                     | ×                |   |                 | and within 1000  | ☐ Is Property/Land within 300 feet of F<br>Creek or Landward side of Floodplain? | i I N, Range | 47        | Gov't Lot                 | n: (Use Tax Statement) | to the state of th | on on behalf of Owr  |                   | Road       | ,           | 7                           | X LAND USE               |
|                                   | e: (explain)   | xplain)   |  | Accessory Building Addition/Alteration (specify) | ding (specify)     | ation (specify)     | Mobile Home (manufactured date) | (□ sanitary, <u>or</u>   | with Attached Garage | with (2 <sup>nd</sup> ) Deck | with a Deck | with (2 <sup>na</sup> ) Porch | with a Porch   | with Loft | Residence (i.e. cabin, hunting shack, etc.) | Principal Structure (first structure on property) |                    |                        | evant to it)  |  | Foundation   | No Basement                             | Basement                   | 2-Story                                    | 1-Story + Loft                      | 1-Story          | # of Stories<br>and/or basement                               |                 | is Property/Land within 1000 feet of Lake, Pond or Flowage | liver, s   |              | O         | Lot(s) C                  |                        | PIN  |  | Con               | 1          | Sity.       |                             | □ SANI                   |
|                                   |  |   |  | /Alteration (sp                                  | )                  | 1 IVI               | date)                           | sleeping que   | arage                |                              |             |                               |  |           | g shack, etc.)                              | icture on prop                                    | Proposed Structure | Length:                | Length:   |  |  |   |                            |  | Year Round                          | ☐ Seasonal       | Use   |                 | Pond or Flowage If yescontinue                             | stream (incl. Intermit   | Cr           | Town of:  | CSM Vol & Page            | 2                      |  | Agent Phone:   | Contractor Phone: | , , ~      |             | $\mathcal{I}_{\mathcal{I}}$ | TARY   PRIVY             |
|                                   | a. Communication   | MANASIE   |  | ecify)   |                    | <u> </u>            |                                 | <b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities) |                      |                              |             |                               |  |           |   | erty)   | ucture             | ,01/ ,ht               | گ<br>آگ   |  |  | □ None                                  |                            | 3  |                                     | TOWN!            | #<br>of<br>bedrooms   |                 | Distance   |  | ron Kir      |           |                           | 7.0                    |  | Agent Mailin   | Plumber:          | IVER WI    | -           | TO UKB                      | CONDITION                |
| reformed to the sight state of an | W. CHANGE OF THE PARTY OF THE P | 7.00 A 4.00 A |  |  | WASHINGTON .       | front porch-awning  |                                 | ing & food prep  |                      | ,                            |             |                               |  |           |   |   |                    | Width:                 | Width:  | □ None   |  | -                                       |                            | <b>X</b> Sanit                             | □ (New                              | □ Mun            | ms  |                 | Distance Structure is from Shoreline:                      | Distance Structure is from Shoreline:fee   | Wer          |           | Lot(s) No.   Block(s) No. |                        | .  | Agent Mailing Address (include City/State/Zip):                      |                   | 5484       |             | 707                         | CONDITIONAL USE [        |
|                                   |  |   |  |  |                    | Maring (            |                                 | facilities) (  | _                    | -                            |             |                               |  | (         | (   |   |                    | 121 /30                | يَ  | ,  | Compost Foilet   | ☐ Portable (w/service contract)         | Privy (Pit) or             | ary (Exists) S                             | /) Sanitary Sp                      | Municipal/City   | What<br>Sewer/San<br>Is on the                                |                 | om Shoreline :   | m Shoreline :  |              | Lot Size  | s) No.   Subdivision:     | <u> </u>               | Recorder   | de City/State/Zip  |                   | 17         |             | Ther I                      | SPECIAL USE              |
| >                                 | < ×  | ×   | THE PROPERTY OF THE PROPERTY O | ×  |                    | デッメ シー<br>ナジ× グナ    | 12 x60                          | ×  | ×                    | ×                            | ×           | ×                             | X  | ×         | ×   | ×   | Dimensions         | s                      | Height:   | - Property of the second of th | Mary of the Control o | contract)                               | Vaulted (min 200 gallon)   | Sanitary (Exists) Specify Type Crain field | (New) Sanitary Specify Type: ( hypu |                  | What Type of<br>Sewer/Sanitary System<br>Is on the property?  |                 |  | Is Property in Floodplain Zone?  |              | ro        | ision:                    | e 916 Page(s)          | ed Document: (   |  | -                 |            |             | 1,64847                     | □ в.о.д                  |
| -                                 | 1  | - -   | ,  |  |                    | ر<br>ندو            | ) 7,                            | _  | -                    | _                            | )           |                               | - Andrews - Andr |           | _   | <u> </u>  |                    | ght: (۞                | th:   |  |  | *************************************** | 200 gallon)                | rain fresh                                 | Seiv.                               | <b>.</b>         |   |                 |  |  | H            | Acreage , |                           | Page(s)                | ☐ Yes ※ No   | Written Authorization<br>Attached                                    | Plumber Phone:    | N/A        | Cell Phone: | 715-372-5676                | . DOTHER                 |
|                                   |  |   |  |  | ,                  | 88/30               | 1                               |  |                      |                              |             |                               |  |           |   | 0   | Square<br>Footage  | 1/10'                  |   |  |  |   |                            |  | X Well                              | □ City           | Water   | :               | No   | Are Wetlands<br>Present?   |              |           |                           | 423                    | Ownership)   | rization   |                   |            | 1           | 7-567                       | 70                       |

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) further accept liability which may be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Date

Address to send permit

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above

Date 6 0

| Attach |  |
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| ,      |  |

Tax 70 18960

SAUTTREY INFO

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zonling Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

JUN 062014

Date: ermit #:

Refund:

Amount Paid: から 20° 29 6-6-14

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

| Shoreland —                           | ☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)  Creek or Landward side of Floodplain? If yescontinue —▶ | Section 33, Township 4/ N, Range 0 |          | 1/4,1/4  | Gov't Lot Lot(s)        | Legal Description: (Use Tax Statement) |                                     |            | Authorized Agent: (Person Signing Application on behalf of Owner(s)) | Contractor: Sel-C | くのえる |                 | Dais Valx                          |                  | TYPE OF PERMIT REQUESTED 🅕   🎢 LAND USE 🛯 SAN |
|---------------------------------------|---|------------------------------------|----------|--|-------------------------|--|-------------------------------------|------------|--|-------------------|------|-----------------|------------------------------------|------------------|---|
| be Dond or Elewage                    | er, Stream (Incl. Intermittent) If yescontinue  | W IR                               | Town of: | we took or "The Market State S | CSM Vol & Page          | 04-024-2-47-08                         | PIN: (23 digits)                    |            | Agent Phone:   | Contractor Phone: |      | City/State/Zip: | 64900 McCary                       | Mailing Address: | ☐ SANITARY ☐ PRIVY ☐                          |
| Distance Structure is from Shoreline: | Distance Structure is from Shoreline:   | Iron River                         | •        | 28/cs55219   | Lot(s) No. Block(s) No. | 04-024-7-47-08-33-100-207-45000        |                                     |            | Agent Mailing Address (include City/State/Zip):                      | Plumber:          |      |                 | 64960 McCary LK Red Iron River, WI | City/State/Zip:  | ☐ CONDITIONAL USE ☐ SPECIAL USE               |
|                                       | <u> </u>  |                                    | Lot Size | Ledin  | Subdivision:            | Volume_                                | Recorded                            |            | 'State/Zip):   |                   |      |                 | EH                                 | 54847            | JAL USE B.U.A.                                |
| □ Yes                                 | Is Property in<br>Floodplain Zone?  |                                    | Acreage  | _  |                         | Page(s                                 | Document: (i.e. Property Ownership) | □ Yes 😿 No | Written Au<br>Attached   | Plumber Phone:    |      | Cell Phone:     | L                                  |                  | O.A. DIHEK                                    |
| ☐ Yes                                 | Are Wetlands Present?   | ,62                                | ,        |  |                         | Page(s) 770                            | rty Ownership)                      | No         | Written Authorization<br>Attached                                    | hone:             |      | ••              | 377-4160                           | <br>j            | 157   |

|   |                                     | If ye                        | If yescontinue | 2001                | feetfeet   | Ø-No   | No<br>No |
|---|-------------------------------------|------------------------------|----------------|---------------------|--|--|----------|
| ☐ Non-Shoreland                                     |                                     |                              |                |                     |  |  |          |
| Value at Time of Completion *include donated time & | Project (What are you applying for) | # of Stories and/or basement | Üse            | #<br>of<br>bedrooms | What Type of<br>Sewer/Sanitary System<br>Is on the property? | ype of<br>ary System<br>property?  | Water    |
|   | ☐ New Construction                  | ☑ 1-Story                    | □ Seasonal     | _ <b>1</b>          | ☐ Municipal/City   | and Advisory of the Control of the C | □ City   |
| •   | ≯Addition/Alteration                | ☐ 1-Story + Loft             | 🖄 Year Round   | □ 2                 | ☐ (New) Sanitary Specify Type:                               | ify Type:  | X/Well   |
| \$ 700  | ☐ Conversion                        | 2-Story                      |                |                     | X Sanitary (Exists) Specify Type: (610                       | ify Type: Coad   |          |
|   | Relocate (existing bldg)            | □ Basement                   |                |                     | ☐ Privy (Pit) or   Vaulted (min 200 gallon)                  | ulted (min 200 gallon)   | - www    |
|   | ☐ Run a Business on                 | □ No Basement                |                | ₩ None              | Portable (w/service contract)                                | ntract)  | •        |
|   | Property                            | ☐ Foundation                 |                |                     | ☐ Compost Toilet   |  | 1        |
|   |                                     | [m]                          |                |                     | None   |  | -        |

| Existing Structure: (If permit being applied for is relevant to it) | rmit bein | gapplied for is relevant to it) Length:           | Width:   |   | Height:    |  |
|---|-----------|---|--|---|------------|--|
| Proposed Construction:  |           |   | Width:   |   | Height:    |  |
| Proposed Use  | <b>\</b>  | Proposed Structure                                |  | 먇 | Dimensions | Square<br>Footage  |
|   |           | Principal Structure (first structure on property) |  |   | ×          |  |
|   |           | Residence (i.e. cabin, hunting shack, etc.)       | The state of the s | _ | ×          |  |
| •   |           | with Loft   | and the second of the second o |   | ×          |  |
| Residential Use   |           | with a Porch                                      | - April 1940   |   | ×          | and the state of t |
| ,   |           | with (2 <sup>nd</sup> ) Porch                     |  |   | ×          |  |
|   |           |   | !  | _ | ×<br>-     |  |

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| Proposed Use   | ۲,        | Proposed Structure   | П | Dimensions | Square<br>Footage  |
|--|-----------|--|---|------------|--|
|  |           | Principal Structure (first structure on property)  |   | х )        |  |
|  |           | Residence (i.e. cabin, hunting shack, etc.)  | _ | ×          |  |
|  |           | with Loft  |   | ×          | A STATE OF THE STA |
| Residential Use  |           | with a Porch   | _ | ×          | - Contraction  |
| •  |           | with (2 <sup>nd</sup> ) Porch  |   | ×          |  |
|  |           | with a Deck  | _ | X )        |  |
|  |           | with (2 <sup>nd</sup> ) Deck   | _ | ×          | TO THE PERSON NAMED IN COLUMN  |
| ☐ Commercial Use   |           | with Attached Garage   | _ | ×          | , property of the control of the con |
|  |           | <b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)   | ^ | ×          |  |
|  |           | Mobile Home (manufactured date)  | _ | ×          |  |
|  |           | Addition/Alteration (specify)  | _ | ×          |  |
| Municipal Use  |           | Accessory Building (specify)   | _ | ×          |  |
| And the second control of the second control | K         | Accessory Building Addition/Alteration (specify) /Cart - 10  | _ | 8 × 30)    | の元の  |
| Rec'd for Issuarice  | fice      |  |   |            |  |
|  |           | Special Use: (explain)   | _ | ×          | -  |
|  |           | Conditional Use: (explain)   | _ | ×          | . Appropriate to the control of the  |
| Social staff   | SHC<br>HC | Other: (explain)   |   | ×          | The state of the s |
| Obertalial of  | 9         | The state of the s | 1 |            |  |

FAILURE TO OBTAIN A PERMIT ON STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described properly at any resignable time for the purpose of inspection.

| Authorized A |  |
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Address to send permit

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Owner(s):

on the Deed All Owners

must sign or letter(s) of authorization must accompany this application)

(If you are signing on behalf of the er(s) a must accompany this application)

Date

Date

6.5.14

Attach
Copy of Tax Statement V
recently purchased the property send your Recorde

| Signature of Inspector: Muchael 6 Hold For Sanitary: Hold For TBA: | Committee or Board Conc   | Meta all sothacles.  Date of Inspection: 6-9-14                          | arcel Legally Created Xyes ☐   | ase #:                                  | Is Parcel a Sub-Standard Lot Yes (Deed of Recolls Parcel in Common Ownership Yes (Fused/Contiles Structure Non-Conforming Yes | Permit#: 14-0119            | Issuance Information (County Use Only) Permit Denied (Date): | Prior to the placement or construction of a structure more than ten (10) for the placement or construction of a structure more than ten (10) for one previously surveyed corner to the other previously surveyed corner, marked by a licensed surveyor at the owner's expense.  (9) Stake or Mark Proposed Location (9) Stake or MotiCE: All Land Use Perroposed Location (10) for The Construction Of New One at the local content of the lo | Setback to Drain Field  Setback to Privy (Portable, Composting)  Prior to the placement or construction of a structure within ten (10) feet of | Setback to Septic Tank or Holding Tank | Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line     | latted<br>int-of-v       | Description             | Please complete (1) – (7) above (prior to continuing)  (8) Setbacks: (measured to the closest point) | 100 mes/ | McCara | y ha   |         | 774 30'                                   | (1) Show Location of: Property (2) Show Location of Propos (3) Show Location of (*): (*) Driv (4) Show: (5) Show: (6) Show any (*): (*) Wel (7) Show any (*): (*) Wel  |
|--|---|--|--|---|---|-----------------------------|--|--|--|--|---|--------------------------|-------------------------|--|----------|--------|--------|---------|---|--|
| Hold For Affidavit:  | illions Attached? Tes No-(If No they need to be attached.) on human holdation. It water | Inspected by: / ///  | No Were Property Lines Represented by Owner No Was Property Surveyed | Previously Granted by Variance (B.O.A.) | (Deed of Record) □ No Mitigation Required □ Yes X No (Fused/Contiguous Lot(s)) X No Mitigation Attached □ Yes X No            | Permit Date: (0 - // - / L/ | Sanitary Number: # of bedrooms:  Reason for Denial:          | In the construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be eyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of surveyor at the owner's expense.  9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling (DE), State or Federal agencies may also require permits.  | the minimum required s   | 150 F Feet Setback to Well             | Feet Setback from Wetland  3 5 Feet Setback from 20% Slope Area    2 Feet Elevation of Floodplain | 1 4                      | Measurement Description | uing) Changes in plans must be approve   |          |        | -<br>/ | Cares e | N. A. | Draw or Sketch your Property (regardless of what you are applying for)  ow Location of:  Proposed Construction  ow / Indicate:  North (N) on Plot Plan  ow Location of (*):  (*) Driveway and (*) Frontage Road (Name Frontage Road)  ow:  All Existing Structures on your Property  ow:  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*)  ow any (*):  (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond  ow any (*):  (*) Wetlands; or (*) Slopes over 20% |
| Date of Approval:  | water under presenc   | Zoning District ( R-1) Lakes Classification ( 1 ) Date of Re-inspection: | Xyes   | Case #                                  | Affidavit Required ☐ Yes 🐧 No<br>Affidavit Attached ☐ Yes 🕱 No  |                             | Sanitary Date:   |  | must be visible from one previously surveyed corner  | 180↓ Feet                              | Feet<br>Feet  | sh-water mark) 2007 Feet | Measurement             | be approved by the Planning & Zoning Dept.   |          | 70556  |        | MWHO 3) |   | IT) and/or (*) <b>Privy</b> (P)  |

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

当於 29 2014

ENTERLIPERMIT #: Refund: Amount Paid: Date: 6-12-14 \$75 5-29-1 14-0189

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL BERMITS HAVE BEEN ISSUED TO APPLICANT.

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

|  | -                                     | ×  | _  | -  |  | Other: (explain)  |                                   | Sperotarial Staf  |
|--|---------------------------------------|--|--|--|--|---|-----------------------------------|---|
|  | _                                     | ×  | _  | THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRE | THE R. P. LEWIS CO., LANSING, MICH.  | Conditional Use: (explain)  |                                   | 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6                         |
|  | `                                     | ×  | ^  | Wilder Community of the | - Hitchest Common Commo | Special Use: (explain)  | Ţ                                 |   |
| •  |                                       | :  |  |  |  |   | _ }                               |   |
| 3  |                                       | シ×に  | <u> </u>                                     | 2nd story  | ion/Alteration (specify)   | Accessory Building Addition/Alteration (specify)  |                                   | Rec'd for Issuance  |
|  | )                                     | ×  | _  |  | (specify)  | Accessory Building (spe   |                                   |   |
|  | )                                     | ×  |  | 700000000000000000000000000000000000000  | (specify)  | 13  |                                   | Municipalica  |
|  | _                                     | ×  | _  | A STATE OF THE STA | red date)  | Mobile Home (manufactured date)   | T                                 | -   |
|  | )                                     | ×  |  | or □ cooking & food prep facilities)   | /, or □ sleeping quarters, or  | Bunkhouse w/ (☐ sanitary,   |                                   |   |
|  | )                                     | ×  | _  | TAMAN AND THE TA | d Garage   | with Attached Garage  |                                   | ☐ Commercial Use  |
|  | )                                     | ×  | _  | Taranta and the same of the sa | ck   | with (2 <sup>na</sup> ) Deck  | Ī                                 |   |
|  | )                                     | ×  |  | THE PARTY OF THE P | VANTA TAMANA   | with a Deck   |                                   |   |
| freezen  | <u> </u>                              | ×  | ~  |  | rch  | with (2 <sup>nd</sup> ) Porch   |                                   |   |
|  |                                       | ×  |  | and the second s | - Commission   | with a Porch  |                                   | A Residential Use   |
|  | _ .                                   | ×  |  |  |  | with Loft   |                                   |   |
| CAMPan   |                                       | ×  | - -  | - Annual Control of the Control of t | nting shack, etc.)   | Residence (i.e. cabin, hunting shack, etc.)   |                                   |   |
| Footage  | -                                     | Dimensions<br>Y  | 1 0  | re   | Proposed Structure   | Principal Structure (first structure on property)   |                                   | Proposed Use  |
| Caraca   |                                       |  |  |  | THE STATE OF THE S |   |                                   |   |
|  | Height:<br>Height:                    | Hei  |  | Width:   | Length:  | Existing structure: In permit being applied for is relevant to it) Proposed Construction:   | permit bei                        | Proposed Construction:  |
|  |                                       |  |  |  |  |   |                                   |   |
|  |                                       |  | e  | ☐ None   |  | - Foundation  | riopeity                          | No.   |
|  |                                       | ntract)  | ervice co                                    | None   Portable (w/service cor   | ent  | ם ב   | Run a Business on                 |   |
|  | Ited (min 200 gallon)                 |  | Vau  | ·  | Manager of the state of the sta |   | elocate (                         |   |
| Service Servic | 0110                                  |  | (s) Sper                                     | 3 4  |  | ¥   | Conversion                        | - C. C. C. C.   |
| X Well   |                                       | ify Type:  | y Specit                                     |  | 巾  | Addition/Alteration   1-Story + Loft  | Addition/                         |   |
| City   |                                       |  | γ  | ☐ 1 ☐ Municipal/City   | ☐ Seasona!   | struction   1-Story   | New Construction                  |   |
| Water  |                                       | What Type of<br>Sewer/Sanitary System<br>Is on the property? | What Type of<br>er/Sanitary Syon the propert | # W<br>of Sewer,<br>bedrooms Is on   | rent Use   | Project # of Stories (What are you applying for) and/or basement  | <b>Project</b><br>hat are you app | Value at Time of Completion * include donated time & material |
|  |                                       |  |  |  |  |   |                                   | DIESTORIC   |
| NO   | 6                                     | )XNO   | feet   | 157  | If yescontinue>  |   |                                   |   |
| □Yes   | 'es                                   | □Yes   | ine:   | Distance Structure is from Shoreline:  | ke, Pond or Flowage  | Is Property/Land within 1000 feet of Lake,  | ls Propert                        | X Shoreland →   |
| Are Wetlands   |                                       | Is Property in   | ine :  | Distance Structure is from Shoreline :   | er, Stream (Incl. Intermittent)  If yescontinue  | ☐ Is Property/Land within 300 feet of River, Stream (Incl. Intermittent)  Creek or Landward side of Floodplain? If yes—continue — | Is Propert<br>reek or Lar         |   |
| <u>~</u>   | Acreage 29                            |  | Lot Size                                     | RIVER  | W TREN   | ip 47 N, Range 8  | , Township                        | Section /   |
|  |                                       | on:  | Subdivision:                                 | Lat(s) No. Block(s) No. S  | CSM Vol & Page   | Gov't Lot Lot(s)  | 1/4                               | 1/4,  |
| Document: (i.e. Property Ownership)  1056 Page(s) 33   | : (i.e. Property<br>Page(s)_          | Document   | Recorded<br>Volume /                         | 04.034-2-47-08-19-105-003-03000 N  | 04-024-247-08-   | <b>ption</b> : (Use Tax Statement)  | Legal Description:                | PROJECT Le  |
| No   | Written Authorization Attached Ves No |  | ate/Zip):                                    | ity/St   | Agent Phone:   | Authorized Agent: (Person Signing Application on behalf of Owner(s))  | Signing App                       | Authorized Agent: (Person                                     |
| one:   | Plumber Phone:                        |  |  | Plumber:   | one:   | 77  | Construction                      | Contractor:   |
| 847-224-6845   | 547-224                               |  |  | W1,54847   | Nik  |   | 0/1                               | 7810 SPIDER   |
| 1571 71  | Cell Phone:                           | 5 454 /  | 100  | KKO IKUN KIVIK   | City/State/Zin:  |   | 5                                 | JEN THOUSE  |
| Telephone:<br>カゲー3ファーリンの /   | Telephone:                            | K/1/2 - 1  |  |  | ng Address:  |   | •                                 | Owner's Name:   |
| HER  | A. OTHER_                             | □ B.O.A.   | N USE  | CONDITIO   | SANITARY PRIVY   | X LAND USE  | ESTED                             | TYPE OF PERMIT REQUESTED                                      |

Address to send permit (If you are signing on behalf of the 7816 SPIDER TRUN PUSE 1 54847 Copy of Tax Statement V ryou recently purchased the property send your Recorded Deed 24847

I (we) declare that this application (including any according any (are) responsible for the detail and accuracy of all in the control of the county relying on this information be a result of Bayfield County relying on this information of the county reasonable the large above described property at any reasonable the large.

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

y accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) yo fill information I (we) am (are) providing and that it will be relied upon by Bayfied County in determining whether to issue a permit. I (we) further accept liability which this introduction I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the

listed on the Deed All Ow

 $\mathcal{M}_{\mathcal{M}}$  must sign <u>or</u> letter(s) of authorization must accompany this application)

Date

Date 5/19/14

Authorized Agent: